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CONFIRMATION NO. 3492

<b>SERIAL NUMBER</b> 10/502,394	<b>FILING OR 371(c) DATE</b> 10/19/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1642	<b>ATTORNEY DOCKET NO.</b> ORIGEN-0015 A
<b>APPLICANTS</b> Zairen Sun, Rockville, MD; Xuan Li, Silver Spring, MD; Gilbert Jay, North Bethesda, MD; Karl Kovacs, Rockville, MD; Wufang Fan, San Diego, CA; Youmin Shu, Potomac, MD;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/01943 01/24/2003 which claims benefit of 60/356,130 02/14/2002				
<b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA 10/054935 01/25/2002 UNITED STATES OF AMERICA 10/102946 03/22/2002 UNITED STATES OF AMERICA 10/117229 04/08/2002 UNITED STATES OF AMERICA 10/144198 05/14/2002 UNITED STATES OF AMERICA 10/197824 07/19/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 54	<b>TOTAL CLAIMS</b> 26
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 7		
<b>ADDRESS</b> 23599				
<b>TITLE</b> Cancer genes				
<b>FILING FEE RECEIVED</b> 1345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	